

MINIMUM LEGAL DRINKING AGE LAWS

Their Effect On Alcohol-Impaired Driving

Alcohol-impaired driving

- ⇒ Every two seconds, someone is injured in an alcohol-related crash in the United States.
- ⇒ In 2007, 12,998 people were killed in alcohol-impaired crashes in the United States.
- ⇒ Deterrence of alcohol-impaired driving is one of the most important preventive measures to reduce motor-vehicle occupant injuries and deaths.

Alcohol-related crashes cost more than \$50 billion every year in medical services, lost productivity, workplace costs, insurance administration, and legal fees.

Facts about minimum legal drinking age (MLDA) laws

- ⇒ MLDA laws specify an age below which the purchase or public consumption of alcoholic beverages is illegal.
- ⇒ In all 50 states, the current MLDA is 21 years.

KEY FINDINGS & RECOMMENDATIONS

These results are based on a systematic review of all available studies led by scientists from CDC's Division of Unintentional Injury Prevention with input from a team of specialists in systematic review methods and experts in research, practice, and policy related to alcohol and injuries. The systematic review found that:

- ⇒ Based on 14 studies, ***raising the MLDA to 21 reduced crashes by 16%*** among the target age group.
- ⇒ Based on 9 studies, ***lowering the MLDA increased crashes by 10%*** among the target age group.
- ⇒ The crash reductions were maintained over follow-up periods ranging from 7 months to 9 years.



IN SUMMARY

The Task Force on Community Preventive Services recommends maintaining MLDA laws, based on strong evidence from this review that these laws are effective in reducing alcohol-impaired driving.

LEARN MORE

The Guide to Community Preventive Services
www.thecommunityguide.org

CDC Fact Sheet: Impaired Driving
www.cdc.gov/ncipc/factsheets/driving.htm

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The Task Force on Community Preventive Services — an independent body of nationally known leaders in public health appointed by the CDC Director— was convened in 1996 by the Department of Health and Human Services (HHS) to assess the effectiveness of interventions in public health and health promotion. HHS mandated the development of the Community Guide as part of their effort to strengthen the scientific basis for public health practice and policy. The Task Force's recommendations, along with the systematic reviews of the scientific evidence on which they are based, are compiled in the *Guide to Community Preventive Services* (2005).